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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/015,309	12/12/2001	Ronald P. Sansone	F-431	5556
919	7590	08/30/2005	EXAMINER	
PITNEY BOWES INC. 35 WATERVIEW DRIVE P.O. BOX 3000 MSC 26-22 SHELTON, CT 06484-8000			BADII, BEHRANG	
		ART UNIT		PAPER NUMBER
		3621		
DATE MAILED: 08/30/2005				

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	10/015,309	SANSONE, RONALD P.	
	Examiner Behrang Badii	Art Unit 3621	

All participants (applicant, applicant's representative, PTO personnel):

(1) Behrang Badii. (3) \_\_\_\_\_.

(2) Ronald Reichman. (4) \_\_\_\_\_.

Date of Interview: 26 August 2005.

Type: a) Telephonic b) Video Conference  
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 1-26.

Identification of prior art discussed: Alden, U.S. patent application publication 2003/0072469.

Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant believes that the limitations in the independent claim are not overcome by the Alden reference, however examiner believes that the Alden reference does teach the limitations in the Alden reference.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
\_\_\_\_\_  
Examiner's signature, if required